

APPLICATION FORM FOR TRANSPORTATION FUND FOR CLEAN AIR REGIONAL FUNDS FY 2000/01

INSTRUCTIONS

Complete Parts I through VI for all applications. Also complete the appropriate supplementary project information sheet(s) for your project type (see Parts VII through XII). Review instructions in Section 4 of Application Guidance prior to completing this form.

SUBMITTAL

Submit two (2) copies of this application form to:

Edward Miller, Supervising Environmental Planner
BAAQMD
939 Ellis Street
San Francisco, CA 94109

All applications must be received by the Air District by **5:00 p.m. Friday, June 30, 2000**.
Hand-delivered applications should be delivered to the TFCA, 7th floor, 939 Ellis St., San Francisco.
Faxed applications will not be accepted.

PART I. SUMMARY INFORMATION

Agency Name:

Date of Application:

Primary Contact Person:

Phone # ()

Fax # ()

E-mail:

Address of Primary Contact:

Secondary Contact Person:

Phone # ()

E-mail:

Name & Title of Person Authorized to Sign Funding Agreement:

Address (if different from Primary Contact above):

Type of Project (see page 3 of the *Application Guidance*):

Project Title:

Total Project Cost:

Amount of TFCA Regional Funding Requested:

PART II. PROJECT DESCRIPTION:

Project Goal:

Name all other participating agencies and describe the role of each agency:

Implementation schedule: (Start date, completion date, and key milestones)

Describe the implementation area for the project (i.e., city, county, region):

PART III. BUDGET

Provide total project budget, broken out by major categories of costs: i.e. capital costs, operating expenses, personnel, etc. Capital costs and operating costs must be separately identified. (Budget may be submitted on a separate sheet.)

PART IV. FUNDING

TFCA Regional Funds (requested)	\$		
TFCA Program Manager Funds	\$		
Other Funds	\$		Source: _____
	\$		_____
	\$		_____
	\$		_____
Total Funds	\$		

Attach documentation for funding identified above as "Other Funds."

PART V. CLEAN AIR POLICIES AND PROGRAMS (EVALUATION CRITERION #3)

The purpose of Evaluation Criterion #3 is to encourage agencies to adopt policies and programs to implement the Transportation Control Measures (TCMs) in the Clean Air Plan. To apply for points for TFCA Criterion #3, complete the section below. A maximum of 10 points will be awarded. Check the box for each TCM that your agency is implementing. This applies to all TCMs your agency is implementing, not just the TFCA project included as a part of this application. For each box checked, provide, in a separate attachment, a brief paragraph describing the policies and actions that your agency has taken to implement the TCM. To obtain a full description of the TCMs, visit the Air District web site at the following address:

<http://www.baaqmd.gov/planning/cap/final/download.htm>, or call the TFCA document request line at (415)749-4994 and request *Appendix E of the 1997 Clean Air Plan*.

- ☐ **TCM 1** SUPPORT VOLUNTARY TRIP REDUCTION PROGRAMS
- ☐ **TCM 3** IMPROVE AREA-WIDE TRANSIT SERVICE
- ☐ **TCM 4** IMPROVE REGIONAL RAIL SERVICE
- ☐ **TCM 5** IMPROVE ACCESS TO RAIL AND FERRIES
- ☐ **TCM 6** IMPROVE INTERREGIONAL RAIL SERVICE
- ☐ **TCM 7** IMPROVE FERRY SERVICE
- ☐ **TCM 8** CONSTRUCT CARPOOL/EXPRESS BUS LANES ON FREEWAYS
- ☐ **TCM 9** IMPROVE BICYCLE ACCESS AND FACILITIES
- ☐ **TCM 10** YOUTH TRANSPORTATION
- ☐ **TCM 11** INSTALL FREEWAY/ARTERIAL TRAFFIC OPERATIONS SYSTEMS
- ☐ **TCM 12** IMPROVE ARTERIAL TRAFFIC MANAGEMENT
- ☐ **TCM 13** TRANSIT USE INCENTIVES
- ☐ **TCM 14** TRIP REDUCTION SERVICES
- ☐ **TCM 15** LOCAL CLEAN AIR PLANS, POLICIES, AND PROGRAMS
- ☐ **TCM 16** INTERMITTENT CONTROL MEASURE / PUBLIC EDUCATION
- ☐ **TCM 17** CONDUCT DEMONSTRATION PROJECTS
- ☐ **TCM 18** IMPLEMENT TRANSPORTATION PRICING REFORM
- ☐ **TCM 19** PEDESTRIAN TRAVEL
- ☐ **TCM 20** PROMOTE TRAFFIC CALMING MEASURES

PART VI. CHECKLIST (Provide documentation as noted)

YES NO N/A

- | | | |
|--|---|---|
| A. Have you discussed your application with the Air District lead contact for your project type? (See <i>Application Guidance</i> , page 7 for contact list.) | — | — |
| B. Have you attached the required Resolution from your Governing Board authorizing the submittal of your application and identifying the individual authorized to submit and carry out the proposal? | — | — |
| C. Have you attached documentation for matching funds that will be applied to the project? | — | — |
| D. Will the project benefit Economically Disadvantaged Communities? (See <i>Application Guidance</i> , page 19 Evaluation Criterion #4.) If yes, provide documentation. | — | — |
| E. For bicycle projects, is the project included in a countywide bicycle plan or county Congestion Management Program? (See Policy #19, page 13 in <i>Application Guidance</i> .) If yes, provide documentation. | — | — |

Applicants for **shuttle projects** (only) must complete questions F and G below:

- | | | |
|--|---|---|
| F. Is your shuttle application accompanied by letters of support from all potentially affected public transit agencies? (See Policy #18, page 12 in the <i>Application Guidance</i> .) | — | — |
| G. Americans with Disabilities Act (ADA) Requirements: (see <i>Application Guidance</i> page 22) | | |
| 1. Does the shuttle/feeder bus providing the service meet the ADA vehicle standards for wheelchair accessibility? | — | — |
| 2. Is there comparable paratransit service provided to eligible persons with disabilities? | — | — |

Supplementary Project Information Sheets follow on pages 6-13 of this application form. Complete and attach the appropriate sheet(s) for your project type, as follows:

- | | |
|---|--------------------------|
| Ridesharing projects - | Part VII |
| Shuttle and feeder bus projects, Vanpool projects - | Part VII & Part VIII |
| Regional transit information projects - | Part VII |
| Rail-bus integration projects - | Part VII |
| Arterial management & signal timing projects - | Part IX (Sections 1-3) |
| Transit bus traffic signal preemption projects - | Part IX (Section 4 only) |
| Bicycle paths, lanes and routes - | Part X |
| Bicycle racks and lockers - | Part XI |
| Transit and school bus replacements - | Part XII |
| Heavy duty clean air vehicles - | Part XII |

SUPPLEMENTARY PROJECT INFORMATION SHEET

PART VII. RIDESHARING PROJECTS; SHUTTLE/FEEDER BUS PROJECTS; REGIONAL TRANSIT INFORMATION PROJECTS; RAIL-BUS INTEGRATION PROJECTS

Provide the data requested in Sections 1 and 2 below. Section 1 requests data on the vehicle trips that will be reduced by the project. Section 2 requests data on any new vehicle trips that will be generated by the project, such as new trips to access a transit station or a Park & Ride lot. If the project has several components, provide the data for each project component on a separate line in Section 1 and Section 2. In Section 3, explain the basis for the data that you provide in Sections 1 and 2. Cite data sources, explain all assumptions, and show relevant calculations. For existing projects, use project-specific data. For new projects, use survey data or data from similar existing projects. Attach supporting documentation as appropriate.

Note: Vanpool projects and shuttle/feeder bus projects must also complete Part VIII on next page.

Section 1. Vehicle Trips To Be Reduced by Project

Project Component	# Trips Reduced Per Day (One-Way)	# Days Per Year	Avg. One-Way Trip Distance	Source of Estimate

Section 2. New Vehicle Trips (e.g. trips to access transit station or Park & Ride Lot)

Project Component	# New Access Trips Per Day (One-Way)	# Days Per Year	Avg. One-Way Trip Distance	Source of Estimate

Section 3. Explanation

SUPPLEMENTARY PROJECT INFORMATION SHEET

PART VIII. SHUTTLE/FEEDER BUS PROJECTS & VANPOOL PROJECTS (ADDITIONAL INFORMATION)

For shuttle and feeder bus projects, complete #1 through #14. (Also complete Part VII on previous page.)
For vanpool projects, complete #1 through #5 only. (Also complete Part VII on previous page.)

1. New service ____ Existing service ____ Modification to existing service ____
2. Number of vehicles to be used in project:
3. For each vehicle:
Gross vehicle weight: Model year: Fuel type: Passenger capacity: Annual Miles:
4. Total number of *one-way* van, shuttle or bus trips *per day* to provide service:
5. Average *one-way* trip length for van, shuttle, or bus:
6. # Days per year of service:
7. Hours of operation:
8. Frequency of service:

Attachments: (Shuttle/Feeder bus Projects Only)

9. Provide map showing shuttle/feeder bus route and stops. Indicate major employment sites to be served.
10. Identify rail or ferry stations to be served. Include the proposed shuttle/feeder bus schedule showing timed connections with arriving or departing train or ferry.
11. For existing shuttle/feeder bus service, attach data showing ridership for the past 3 years.
12. For new or modified shuttle/feeder bus service, attach documentation to support estimates for projected number of users (e.g. survey data from local work sites).
13. Shuttle/feeder bus projects that are not sponsored by a transit agency must submit documentation to demonstrate compliance with TFCA Policy #18 (see *Application Guidance*, page 12).
14. Shuttle operators must comply with the requirements of the Americans with Disabilities Act (ADA). Complete Question G (both parts) in the Checklist (see Application Form, page 5).

SUPPLEMENTARY PROJECT INFORMATION SHEET

PART IX. ARTERIAL MANAGEMENT PROJECTS

Complete Sections 1-3 for signal timing projects. In Section 1, use a separate line for each segment, each time period (i.e., 9a.m. - 3p.m. etc.), and each direction of traffic (i.e., northbound, southbound, etc.). Complete Section 4 only for transit bus traffic signal prioritization projects.

Section 1. Conditions With and Without Project (Vehicle speed and traffic volume must be measured concurrently.)

Name of Arterial/Segment	Direction of Traffic Flow	Congested Period (e.g. M-F, 4 pm- 6 p.m.)	# Days per Year of Congestion	Segment Length (nearest 0.1 mile)	Traffic Volume in Congested Period	ADT or Peak Hr. Volume	Average Vehicle Speed w/o Project	Est. Avg. Vehicle Speed with Project

Section 2. Projects for which applicants commit to monitoring and, if necessary, retiming lights 2 years after completion of construction will be evaluated using 4 years of project effectiveness instead of the 2 year default value.

Applicant commits to monitoring and retiming lights 2 years after of completion of construction. ___Yes___No

Section 3. Which of the following conditions best describes your signal system before and after the proposed project.

Before Condition

- ☐ Non-interconnected pre-timed signals with old timing plans
☐ Interconnected pre-timed signals with old timing plans (mainly single-dial)
☐ Non-interconnected signals with traffic-actuated controllers
☐ Interconnected pre-timed signals with actively managed timing plans (multiple dials)
☐ Interconnected pre-timed signals, various forms of master control and various qualities of timing plans
☐ Other (describe) _____

After Condition

- ☐ Advanced computer based control
☐ Optimization of signal timing plans - No changes in hardware
☐ Other (describe) _____

Section 4. Transit Bus Traffic Signal Prioritization Projects Only:

Provide the following information for each bus route that would benefit from project:

Route #	Avg. age of buses on route	Distance of bus route (1-way)	Days/yr. of service	Current # of runs/day (1-way)	# of runs/day added w/project	Current avg. speed of run	Estimated avg. speed w/project	Current avg. riders/run	# of new riders expected w/project	Est. # of new riders - previously drove alone

SUPPLEMENTARY PROJECT INFORMATION SHEET

PART X. BICYCLE FACILITY IMPROVEMENT PROJECTS: BICYCLE PATHS, LANES, AND ROUTES

All bicycle projects must be in an adopted countywide bicycle plan or congestion management program. Projects must conform to all applicable Caltrans design guidelines. You may expand this form as needed to provide the information required below.

Attachments: Please provide the following attachments:

- a. Documentation that project is contained in an adopted countywide bicycle plan or congestion management program.
- b. Documentation that project has been reviewed/endorsed by the relevant local Bicycle Advisory Committee(s).
- c. Map of proposed bicycle facility, indicating major activity centers to be served by project.
- d. Map of overall local bicycle network showing existing and planned bikeways.
- e. Schematic diagrams showing cross-section of current roadway without project and with the proposed bicycle facility project.

Project Information Complete Sections 1 through 9 below.

1. Project Specifications:

Type of Facility - Class 1, 2, or 3:

Length of proposed facility: (e.g. 3.0 miles total: 1.8 mi. Class 2 plus 1.2 mi. Class 3)

Describe design features: (e.g. width of lane or path, signals, signs, loop detectors, etc)

Will project comply with applicable Caltrans design standards? ☐ YES ☐ NO If no, explain:
(See Chapter 1000 in California Highway Design Manual)

Describe lighting, landscaping, or other amenities to be provided:

2. Roadway characteristics: Provide the following information for the street or arterial where the project will be constructed. For a Class I bicycle path or trail, provide information for the street or arterial *which most closely parallels* the planned path or trail.

Name of street or arterial:

Average daily traffic volume (ADT):

Posted speed limit:

of vehicle lanes:

Width of outer lane:

Paved shoulder? ☐ YES ☐ NO

Shoulder width:

Auto parking in curb lane? ☐ YES ☐ NO

Describe topography. Describe any hills greater than 5% grade:

Describe existing pavement condition:

3. Relationship of proposed facility to existing and planned bike network:

Would project close a gap in an existing bikeway network? ☐ YES ☐ NO

Describe existing and/or planned bicycle facilities within one-half mile of project:

SUPPLEMENTARY PROJECT INFORMATION SHEET

PART X. BICYCLE FACILITY IMPROVEMENT PROJECTS: BICYCLE PATHS, LANES, AND ROUTES (CONT.)

4. Key activity centers: Describe key trip generators and attractors that will be served by the facility; e.g. transit stations, business parks, schools or colleges, retail districts. Indicate distance of each attractor/generator from the proposed facility. If available, provide daily volume for each attractor/generator (e.g. # employees at business park; # students and staff at school or college; # trips/day to shopping center). Describe characteristics of the user population that would support use of proposed bicycle facility.
5. Impact on motor vehicle traffic: Will the project reduce motor vehicle capacity? Describe how the project will affect the existing roadway design. If the project will reduce motor vehicle capacity, describe the projected impact on motor vehicle speed, traffic congestion, etc. Provide any data or analyses of the project's potential impact on motor vehicle travel as an attachment.
6. Environmental review: Describe the environmental review requirements that pertain to the project. Indicate status of environmental review process and projected date of approval for all necessary environmental documents.
7. Right of way status: Does project sponsor own the entire project right-of-way? Describe any land acquisition, easement, encroachment permit, etc. that will be required. Provide documentation of easements or permits, if available, or schedule to acquire them.
8. Review and approval process: Describe process for securing final approval to implement project. List all steps needed to secure final approval (e.g. neighborhood outreach/meetings, council approval, etc.) and provide schedule for all steps.
9. Maintenance of facility: Describe maintenance plan, responsible agency, frequency of maintenance, estimated annual maintenance budget for the project facility, and source of maintenance funds. For bicycle lanes, indicate frequency of sweeping of the bike lane.

SUPPLEMENTARY PROJECT INFORMATION SHEET

PART XI. BICYCLE LOCKERS & RACKS / BICYCLE RACKS ON BUSES

Complete Section A for bicycle lockers and stationary bicycle racks. Complete Section B for bicycle racks on transit buses. Please provide the following as Attachments: 1) documentation to show that project is included in an adopted countywide bicycle plan or county congestion management program; 2) summary of the design specifications for the racks or lockers.

Section A. Bicycle Lockers & Racks:

1. Bicycle lockers: Total # units: Total # of bicycles accommodated:
Bicycle racks: Total # units: Total # of bicycles accommodated:
2. Describe location of proposed lockers/racks. Describe existing lockers / racks in project area, and occupancy rate of existing lockers/racks. Describe physical environment (indoor, outdoor, covered, lighting, etc.). Attach map of project site(s).
3. Explain why lockers / racks are needed at project site(s).
4. Describe how sites will be selected and the criteria that will be used to prioritize sites.
5. Describe how lockers will be assigned to cyclists, length of time that locker will be assigned (e.g. quarterly, annually), and who will be responsible for administering the locker program.
6. Will a fee be charged to rent the lockers? ☐ YES ☐ NO If yes, how much ?
7. Describe type of lockers or racks to be purchased and expected lifespan of lockers/racks. Attach summary of specifications.
8. Describe security situation in area where lockers/racks are to be installed.
9. Provide name of locker/rack vendor, if this has been determined.

Section B. Bicycle Racks on Transit Buses:

1. # Buses to be equipped with racks:
2. # Bikes per rack:
3. List routes to be equipped with racks and average daily ridership per route:
4. Percent of runs that will be covered by buses equipped with bike racks:
5. Describe previous experience with bike racks on buses, if any. Provide data on usage of any existing racks on buses.

SUPPLEMENTARY PROJECT INFORMATION SHEET

PART XII. SCHOOL AND TRANSIT BUS/CLEAN AIR VEHICLE GREATER THAN 10,000 LBS GVW

Provide the following information for school or transit buses, or clean air vehicles greater than 10,000 lbs. GVW.

Note: Applicants must complete a separate application form for each fuel type (i.e. natural gas only, electric vehicles only) and for each of the following categories of vehicles: 1) medium duty vehicles; 2) school buses; 3) transit buses; 4) heavy duty vehicles (other than buses), and 5) other vehicle types (e.g. parking enforcement vehicles, small utility vehicles etc.). For example, a project sponsor seeking funding for a medium duty electric vehicle, a medium duty natural gas vehicle, and a heavy duty natural gas vehicle will need to submit three applications.

1. Are you a previous recipient of a grant for clean air vehicles from the Air District, including any County Program Manager fund grants? ☐ YES ☐ NO

If yes, list the project number(s), and describe the number and type(s) of vehicle(s) acquired.

2. Indicate where you plan to refuel/recharge the vehicles identified in this grant application. Indicate whether the refueling/recharging facility is new or existing. If it is a new facility, indicate how the facility will be financed.

Is the facility (will it be) accessible to the public? ☐ YES ☐ NO If yes, describe the public access.

3. Indicate the make and model, fuel type, estimated life, and estimated annual miles for each vehicle that you plan to acquire. If estimates of life and annual mileage are different than the actual mileage and life of similar vehicle(s) in the fleet, explain why. For heavy duty vehicles, indicate the engine manufacturer and engine size. You may only list vehicles that comply with TFCA Policy # 13 (see the *Application Guidance*, page 10).

Vehicles to be Acquired

Number of Vehicles	Make	Model	Fuel Type	Engine Maker	Engine Size (liters)	Estimated Life (Yrs.)	Average Annual Mileage